

**STATE OF SOUTH DAKOTA**  
**Statement of Legal Newspaper Ownership and Circulation**

as required by SDCL § 17-2-2.5

**RECEIVED**

SEP 27 2016

S.D. SEC. OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER <b>The Dakota Herald</b>		2. DATE <b>9-26-16</b>
3. FREQUENCY OF ISSUE <b>Weekly</b>	3A. NO. OF ISSUES PUBLISHED ANNUALLY <b>52</b>	3B. ANNUAL SUBSCRIPTION PRICE \$ <b>45.00</b>
4. COMPLETE PHYSICAL ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers) <b>P.O. Box 207; Lemmon, SD 57638-0207</b>		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers) <b>P.O. Box 207; Lemmon, SD 57638-0207</b>		
6. FULL NAME OF PUBLISHER: <b>LaQuita Shockley</b>		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.)		
FULL NAME <b>LaQuita Shockley</b>		COMPLETE MAILING ADDRESS <b>P.O. Box 207; Lemmon, SD 57638-0207</b>
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.) <b>None</b>		
9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	<b>1100</b>	<b>1100</b>
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, counter sales, and paid electronic copies.	<b>160</b>	<b>165</b>
2. Mail Subscription (Paid and or requested)	<b>884</b>	<b>865</b>
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	<b>1044</b>	<b>1030</b>
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS		
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	<b>21</b>	<b>24</b>
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	<b>1065</b>	<b>1054</b>
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	<b>35</b>	<b>46</b>
2. Return from News Agents		
G. TOTAL (Sum of E, F1 and F2 - Should equal net press run shown in A)	<b>1100</b>	<b>1100</b>

**Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public**  
**I swear that the statements made by me are true, correct, and complete:**

*Janice A. Kergan*  
 (Signature)

Assistant  
 (Title)

State of South Dakota )  
 )  
 County of Perkins )

(Seal)

Sworn to before me this 26<sup>th</sup> day of September 20 16

*LaQuita Shockley*  
 Notary Public

My commission expires: 6-17-19